

APPLICATION DATA SHEET**Application Information**

Application number::
 Filing Date:: 01/04/02
 Application Type:: Regular
 Subject Matter:: Utility
 Suggested classification::
 Suggested Group Art Unit::
 CD-ROM or CD-R?:: No
 Number of CD disks::
 Number of copies of CDs::
 Sequence submission?:: No
 Computer Readable Form (CRF)?:: No
 Number of copies of CRF::
 Title :: SPINAL NEEDLE SYSTEM
 Attorney Docket Number:: 170134.401
 Request for Early Publication?:: No
 Request for Non-Publication?:: No
 Suggested Drawing Figure::
 Total Drawing Sheets:: 9
 Small Entity?:: Yes
 Petition included?:: No
 Petition Type::
 Licensed U.S. Gov't Agency:: No
 Contract or Grant No::
 Secrecy Order in Parent Appl.?:: No

First Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Vincent
Middle Name:: E.
Family Name:: Bryan
Name Suffix::
City of Residence:: Mercer Island
State or Province of Residence:: WA
Country of Residence:: US
Street of mailing address:: 4624 E. Mercer Way
City of mailing address:: Mercer Island
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98040

Second Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Alex
Middle Name::
Family Name:: Kunzler
Name Suffix::
City of Residence:: Issaquah
State or Province of Residence:: WA
Country of Residence:: US
Street of mailing address:: 22748 S.E. 43 Court

City of mailing address:: Issaquah
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98029

Correspondence Information

Correspondence Customer Number :: **00500**

Representative Information

Representative Customer Number::		00500
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	

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